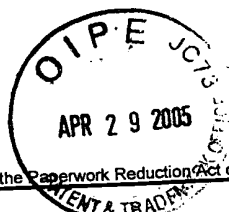


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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/516,589
Filing Date	12/3/2004
First Named Inventor	Jurgen NICK
Title	MEMBRANES MADE OF CAST POLYARYLA
Art Unit	
Examiner Name	
Attorney Docket Number	LP-2000

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:
OR

000217

☐ Practitioner(s) named below:

Name	Registration Number
Virgil H. Marsh	23,083
Kara M. Armstrong	38,234

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:
OR

☐ The address associated with Customer Number:
OR

000217

<input type="checkbox"/> Firm or Individual Name	Fisher, Christen & Sabol				
Address	1725 K Street NW Suite 1108				
City	Washington	State	DC	Zip	20006
Country	United States of America				
Telephone	202 659-2000	Fax	202 659-2015		

I am the:

☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>J. Nick</i>	Date	2005/04/14
Name	Jurgen NICK	Telephone	
Title and Company	Tech. Services / LOFO High Tech Film		

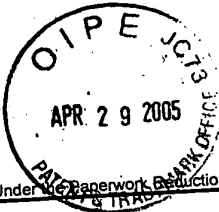
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

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000217

☐ Firm or Individual Name Fisher, Christen & Sabol

Address 1725 K Street NW Suite 1108
City Washington State DC Zip 20006
Country United States of America
Telephone 202 659-2000 Fax 202 659-2015

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SIGNATURE of Applicant or Assignee of Record

Signature *Ulrich Siemann* Date 2005/04/14
Name Ulrich SIEMANN Telephone
Title and Company Head of Business Development - LOFO High Tech Film

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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